

FEC FORM 9

24 HOUR NOTICE OF DISBURSEMENTS/OBLIGATIONS FOR ELECTIONEERING COMMUNICATIONS

1. Individual, Organization or Qualified Nonprofit Corporation Making the Disbursement/Obligations

(a) Name

AMERICAN FUTURE FUND

(b) Address (number and street)

4225 FLEUR DRIVE #142

☐ check if different than previously reported

(c) City, State and ZIP Code

DES MOINES

IA

50321

(d) Name of Employer or Principal Place of Business

(e) Occupation

2. FEC Identification Number

C C30001028

3. Is This Statement

☐

New

or

☒

Amended

4. Covering Period

M M / D D / Y Y Y Y
1 0 / 2 6 / 2 0 1 0

through

M M / D D / Y Y Y Y
1 0 / 2 8 / 2 0 1 0

5. (a) Date of Public Distribution(s)

M M / D D / Y Y Y Y
1 0 / 2 6 / 2 0 1 0

(b) Communication Title

Not the Sopranos

6. The filer is a(n):

(a) ☐ Individual(b) ☐ Unincorporated Organization(c) ☐ Qualified Nonprofit Corporation (11 CFR 114.10)(d) ☒ Corporation, Labor Organization or Qualified Nonprofit Corporation making communications under 11 CFR 114.15(e) ☐ Other, specify: _____

7. Were the disbursements for the electioneering communication made exclusively from donations to a segregated bank account?

Yes ☐No ☐

8. Custodian of Records

(a) Name

Sandy Greiner

(b) Address (number and street)

4225 Fleur Drive #142

(c) City, State and ZIP Code

Des Moines

IA

50321

(d) Name of Employer or Principal Place of Business

self-employed

(e) Occupation

farmer

9. Total Donations This Statement

.00

10. Total Disbursements/Obligations This Statement

62200.00

Under penalty of perjury, I certify that this statement is true, correct and complete.

TYPE OR PRINT NAME OF PERSON COMPLETING FORM

Sandy Greiner

SIGNATURE Electronically Filed by Sandy Greiner

DATE 10/27/2010

NOTE: Submission of false, erroneous or incomplete information may subject the person signing this statement to the penalties of 2 U.S.C. 437g.

Disbursement(s) Made or Obligations

A. Full Name (Last, First, Middle Initial) of Payee Mentzer Media Services, Inc				Date of Disbursement or Obligation <div style="display: flex; justify-content: space-around;"> <div><small>M</small> <small>M</small> 1 0</div> <div><small>D</small> <small>D</small> 2 6</div> <div><small>Y</small> <small>Y</small> <small>Y</small> <small>Y</small> 2 0 1 0</div> </div>			
Mailing Address of Payee 600 Fairmount Ave, Ste 306				Amount <div style="border: 1px solid black; padding: 2px; text-align: right;">20000.00</div>			
City Towson		State MD		Zip Code 21286		Communication Date <div style="display: flex; justify-content: space-around;"> <div><small>M</small> <small>M</small> 1 0</div> <div><small>D</small> <small>D</small> 2 6</div> <div><small>Y</small> <small>Y</small> <small>Y</small> <small>Y</small> 2 0 1 0</div> </div>	
Name of Employer		Occupation		Transaction ID : F93.000001			
Purpose of Disbursement (including title(s) of communication(s)) Radio Ad Placement							
Name of Federal Candidate John Tierney		Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President		State: <u>MA</u> District: <u>06</u>		Disbursement/Obligation For: 2010 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) _____	
F94.000002							
Name of Federal Candidate		Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President		State: _____ District: _____		Disbursement/Obligation For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) _____	
Name of Federal Candidate		Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President		State: _____ District: _____		Disbursement/Obligation For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) _____	
B. Full Name (Last, First, Middle Initial) of Payee McCarthy Marcus Hennings							
Mailing Address of Payee 1850 M Street, NW Suite 235				Date of Disbursement or Obligation <div style="display: flex; justify-content: space-around;"> <div><small>M</small> <small>M</small> 1 0</div> <div><small>D</small> <small>D</small> 2 6</div> <div><small>Y</small> <small>Y</small> <small>Y</small> <small>Y</small> 2 0 1 0</div> </div>			
City Washington		State DC		Zip Code 20036		Amount <div style="border: 1px solid black; padding: 2px; text-align: right;">2250.00</div>	
Name of Employer		Occupation		Communication Date <div style="display: flex; justify-content: space-around;"> <div><small>M</small> <small>M</small> 1 0</div> <div><small>D</small> <small>D</small> 2 6</div> <div><small>Y</small> <small>Y</small> <small>Y</small> <small>Y</small> 2 0 1 0</div> </div>			
Transaction ID : F93.000002							
Purpose of Disbursement (including title(s) of communication(s)) Radio Ad Production							
Name of Federal Candidate John Tierney		Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President		State: <u>MA</u> District: <u>06</u>		Disbursement/Obligation For: 2010 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) _____	
F94.000004							
Name of Federal Candidate		Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President		State: _____ District: _____		Disbursement/Obligation For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) _____	
Name of Federal Candidate		Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President		State: _____ District: _____		Disbursement/Obligation For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) _____	
SUBTOTAL of Disbursement/Obligation This Page (optional)							
TOTAL This Period (last page this line number only) (carry total from last page to line 10)							

SCHEDULE 9-B**Disbursement(s) Made or Obligations**

A. Full Name (Last, First, Middle Initial) of Payee Mentzer Media Services, Inc				Date of Disbursement or Obligation <div style="display: flex; justify-content: space-around;"> <div>M M / D D / Y Y Y Y 1 0 / 2 6 / 2 0 1 0</div> </div>			
Mailing Address of Payee 600 Fairmount Ave, Ste 306				Amount <div style="border: 1px solid black; padding: 2px; text-align: right;">39950.00</div>			
City Towson		State MD		Zip Code 21286		Communication Date <div style="display: flex; justify-content: space-around;"> <div>M M / D D / Y Y Y Y 1 0 / 2 6 / 2 0 1 0</div> </div>	
Name of Employer 				Occupation 			
Purpose of Disbursement (including title(s) of communication(s)) Radio Ad Placement							
Name of Federal Candidate John Tierney		Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President		State: MA District: 06		Disbursement/Obligation For: 2010 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) _____	
F94.000006		Name of Federal Candidate		Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President		State: _____ District: _____	
Name of Federal Candidate		Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President		State: _____ District: _____		Disbursement/Obligation For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) _____	

SUBTOTAL of Disbursement/Obligation This Page (optional)

39950.00

TOTAL This Period (last page this line number only)
 (carry total from last page to line 10)

62200.00